

PATENT APPLICATION SERIAL NO. _____

U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE
FEE RECORD SHEET

05/14/2001 RHARIS1 00000032 09852400

01 FC:101	710.00 DP
02 FC:102	1440.00 DP
03 FC:103	486.00 DP

PTO-1556

(5/87)

*U.S. GPO: 2000-468-987/39595

05-11-01

A

05/09/01
Jc839 U.S. PTO

Customer No. 000959
Case Docket No. GFN-5405

J1000 U.S. PTO
09/852400
05/09/01

Box Patent Application
Commissioner for Patents
Washington, D.C. 20231

"Express Mail" Mailing Label Number: EL 746 157 896 US
Date of Deposit: May 9, 2001
I hereby certify that this transmittal letter and the papers referred to as being enclosed therein are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to: Box Patent Application, Commissioner for Patents, Washington, D.C. 20231.
[Signature]
Signature
Ilidio P. Cardoso
Please Print Name of Person Signing

Sir:

Transmitted herewith for filing is the patent application of:

Inventor(s): William L. Trepicchio, Judith L. Oestreicher, Andrew J. Dorner, and James G. Krueger

For: "*Compositions, Kits, and Methods for Identification, Assessment, Prevention, and Therapy of Psoriasis*"

Enclosed are:

- ☒ 11 pages of specification, 8 pages of claims, 1 page of abstract.
- ☒ 12 sheets of drawings (Figures 1-7).
- ☒ An unexecuted Declaration, Petition and Power of Attorney for Patent Application (*6 pages*).
- ☒ Return postcard.

The filing fee has been calculated as shown below:

(Col. 1)		(Col. 2)	SMALL ENTITY			OTHER THAN SMALL ENTITY	
FOR:	NO. FILED	NO. EXTRA	RATE	FEE	OR	RATE	FEE
BASIC FEE	////////////////////		////////	\$	OR	////////	\$ 710
TOTAL CLAIMS	47 - 20	= 27	x 9=	\$	OR	x 18=	\$ 486
INDEP. CLAIMS	21 - 3	= 18	x 40	\$	OR	x 80	\$ 1440
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS PRESENTED			+135	\$	OR	+270	\$
			TOTAL	0	OR	TOTAL	\$2636.00

* If the difference in Col. 2 is less than zero, enter "0" in Col. 2.

* If the difference in Col. 2 is less than zero, enter "0" in Col. 2.

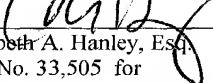
- ☐ Please charge my Deposit Account No. 12-0080 in the amount of \$_____.
A duplicate copy of this sheet is enclosed.
- ☒ A check in the amount of \$2,636.00 to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 12-0080.
A duplicate copy of this sheet is enclosed.
 - ☒ Any additional filing fees required under 37 C.F.R. 1.16.
 - ☒ Any patent application processing fees under 37 C.F.R. 1.17.

- ☐ The Commissioner is hereby authorized to charge payment of the following fees during the pendency of this application or credit any overpayment to Deposit Account No. 12-0080.
A duplicate copy of this sheet is enclosed.
- ☐ Any patent application processing fees under 37 C.F.R. 1.17.
- ☐ The issue fee set in 37 C.F.R. 1.18 at or before mailing of the Notice of Allowance, pursuant to 37 C.F.R. 1.311(b).
- ☐ Any filing fees under 37 C.F.R. 1.16 for presentation of extra claims.
- ☐ A check in the amount of \$ _____ to cover the recording of assignment documents is also enclosed.
- ☒ Address all future communications (May only be completed by applicant, or attorney or agent of record) to Amy E. Mandragouras, Esq. at **Customer Number: 000959** whose address is:

Lahive & Cockfield, LLP
28 State Street
Boston, Massachusetts 02109

Date: May 9, 2001

LAHIVE & COCKFIELD, LLP
Attorneys at Law

By 
Elizabeth A. Hanley, Esq.
Reg. No. 33,505 for
Amy E. Mandragouras, Esq.
Reg. No. 36,207
28 State Street
Boston, MA 02109
(617) 227-7400
Telecopier (617) 742-4214

0054100 05094
FO6050 00125800